## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or  $\underline{\underline{\mathsf{D}}}$ ocket Number

10737342

| CLAIMS AS FILED - PART I (Column 1)                                    |  |   |                  |   |                              | mn 2)                                  |   | SMALL ENTITY TYPE C |                         |     | OTHER THAN OR SMALL ENTITY |                        |  |
|--|--|---|------------------|---|------------------------------|--|---|---------------------|-------------------------|-----|----------------------------|------------------------|--|
| TC   | TAL CLAIMS   |   | 10               |   | (00.0.                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Γ | RATE                | FEE                     | ا ا | RATE                       | FEE                    |  |
| FOR  |  |   | NUMBER FILED     |   | NUMBER EXTRA                 |  | E | BASIC FEE           | 385.00                  | OR  | BASIC FEE                  | 770.00                 |  |
|  | TAL CHARGEA  | BLE CLAIMS                                      | ろO minus 20=     |   | * 10                         |  | f | X\$ 9=              | 90                      | OR  | X\$18=                     |                        |  |
|  |  |   | minus 3 =        |   | * 0                          |  | ŀ | X43=                | 10                      |     | X86=                       |                        |  |
| INDEPENDENT CLAIMS minus  MULTIPLE DEPENDENT CLAIM PRESENT             |  |   |                  |   |                              |  | - | A43=                |                         | OR  | 700-                       |                        |  |
|  |  |   |                  |   |                              |  |   | +145=               | 145                     | OR  | +290=                      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column |  |   |                  |   |                              |  |   | TOTAL               | 620                     | OR  | TOTAL                      |                        |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)          |  |   |                  |   |                              |  |   | SMALLE              | NTITY                   | OR  | OTHER<br>SMALL             | 3                      |  |
| AMENDMENT A  |  | CLAIMS REMAINING AFTER AMENDMENT                |                  | HIGH<br>NUM<br>PREVIO                         | IEST<br>BER<br>DUSLY         | PRESENT<br>EXTRA                       |   | RATE                | ADDI-<br>TIONAL<br>FEE. |     | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus            | **  |                              | =                                      |   | X\$ 9=              | ;                       | OR  | X\$18=                     |                        |  |
|  | Independent  | *   | Minus            | ***   |                              | =                                      | Ī | X43=                |                         | OR  | X86=                       |                        |  |
| ⋖  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                  |   |                              |  |   | +145=               |                         | OR  | +290=                      |                        |  |
| L  |  |   |                  |   |                              |  |   | TOTAL<br>ADDIT. FEE |                         | OR  | TOTAL<br>ADDIT. FEE        |                        |  |
|  | (Column 1) (Column 2) (Column 3)   |   |                  |   |                              |  |   |                     | <u></u>                 | 1   | ADDIT. PEC                 |                        |  |
| AMENDMENT B  |  | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |                  | HIGH<br>NUM<br>PREVI                          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                       |   | RATE                | ADDI-<br>TIONAL<br>FEE  |     | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus            | **  |                              | =                                      |   | X\$ 9=              |                         | OR  | X\$18=                     |                        |  |
|  | Independent  | *   | Minus            | ***   |                              | =                                      |   | X43=                |                         | OR  | X86=                       |                        |  |
| ٩  | FIRST PRESENTATION OF MULTIPLE DEPEND  |   |                  |   | T CLAIM                      |  | 1 | +145=               |                         | OR  | +290=                      |                        |  |
|  |  |   |                  |   |                              |  | L | TOTAL               |                         | OR  | TOTAL<br>ADDIT. FEE        |                        |  |
|  |  | (Column 1)                                      |                  | /Colu   | mn 2)                        | (Column 3)                             | , | ADDIT. FEE          | L                       |     | ADDIT. I EL                | - <del> </del>         |  |
| AMENDMENT C  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT     |                  | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR |                              | PRESENT<br>EXTRA                       |   | RATE                | ADDI-<br>TIONAL<br>FEE  |     | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Totai  | *   | Minus            | **  |                              | =                                      |   | XS 9=               |                         | OR  | X\$18=                     |                        |  |
|  | Independent  | *   | Minus            | ***   |                              | =                                      | ] | X43=                |                         | OR  | X86=                       |                        |  |
| ⋖  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                  |   |                              |  |   |                     |                         | 1   | 000                        |                        |  |
|  | If the entry is eath   | mn 1 is less than t                             | he entry in cali | ımn 2. writ                                   | le "O" in co                 | olumn 3                                | l | +145=<br>TOTAL      |                         | OR  | †290=                      |                        |  |
| **   | • If the entry in column 1 is less than the entry in column 2, write "0" in column 3  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1 |   |                  |   |                              |  |   |                     |                         |     |                            |                        |  |